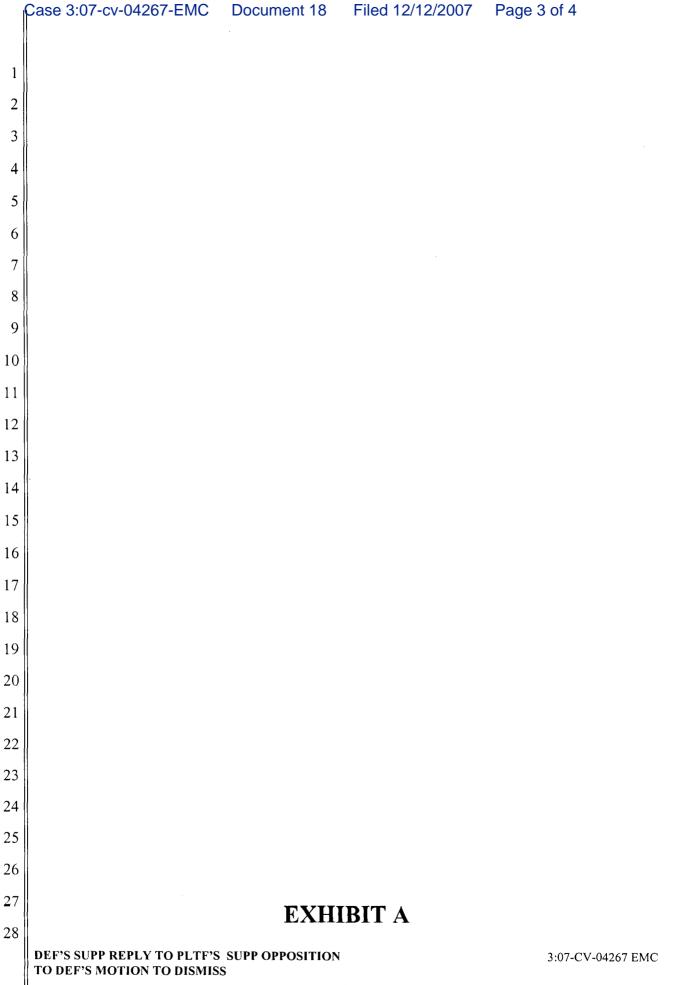
As of the writing of this supplemental reply, Dunn has not filed anything with the 1 2 Court. Dunn did, however, mail a blank copy of a document titled Notice of Narcotic Offender 3 Registration Requirement - 11590 H & S, with an image of a Registration Receipt dated 4 November 29, 2007. (Attached as Exhibit A.) It is unclear if Dunn intended to file this 5 document with the Court and/or whether he believes that it supports his claim against the State. 6 Nevertheless, a review of this document reveals nothing which would support his claim that 7 California Health and Safety Code section 11594 provides the State with authority to stop and 8 search his vehicle without probable cause. 9 Therefore, for all of the reasons set forth in its Motion to Dismiss, the State respectfully requests that the Court dismiss Dunn's entire Complaint without leave to amend. 10 Dated: December 12, 2007 11 12 Respectfully submitted, EDMUND G. BROWN JR. 13 Attorney General of the State of California 14 CHRISTOPHER E. KRUEGER Senior Assistant Attorney General 15 DOUGLAS J. WOODS Supervising Deputy Attorney General 16 17 /S/ Jack Woodside 18 JACK WOODSIDE 19 Deputy Attorney General Attorneys for Defendant State of California 20 21 22 23 24 25 26 27 28

DEF'S SUPP REPLY TO PLTF'S SUPP OPPOSITION TO DEF'S MOTION TO DISMISS

3:07-CV-04267 EMC



State of California
NOTICE OF NARCOTIC OFFENDER REGISTRATION REQUIREMENT – 11590 H & S
FORM SS-8048 (Rev. 1/04)

Department of Justice

Sex Offender Tracking Program
P.O. Box 903387, Sacramento, CA 94203-3870

NOTICE OF NARCOTIC OFFENDER REGISTRATION REQUIREMENT - 11590 H & S

	FULL NAME OF PERSO	N NOTIFIED			Last		First	:	Middle	
PERSONAL HISTORY INFORMATION	DATE OF BIRTH	DATE OF BIRTH SEX RACE		HEIGHT WEIGHT		EYES HAIR			SOCIAL SECURITY NUMBER	
	DRIVER'S LICENSE NU	IMBER	CII NU	MBER (SID)	. <u></u>	FBI NUMBER	}	•	NSTITUTION NUMBER	
CONVICTION	ARRESTING AGENCY		DATE OF ARREST F			DSECUTING AGENCY PROS		PROSECUT	DSECUTING AGENCY & CASE NUMBER	
INFORMATION	REGISTRABLE CONVICTION MISD		MISD F	EL DATE	OF CONVICT	ON DATE OF SCHEDULED DISCHARGE OR RELEASE			DATE PAROLE OR PROBATION EXPIRES	
	ADDRESS WHERE PER	SON NOTIFIE	ED EXPEC	TS TO RESID	DE UPON DISC	HARGE, PARO	LE, OR RELE	EASE (Full s	treet address, city, and zip code)	
RELEASE INFORMATION NOTIFICATION STATEMENT	NAME OF AGENCY SUPERVISING PAROLE OR PROBATION NAME OF SUPERVISING PAROLE OR PROBATION OFF U.S. Probation Office, Northern District of California							OR PROBATION OFFICER		
	ADDRESS	. Or Camorria				TELEPHO	ONE NUMBER			
	NARCOTICS OFFENDER NOTIFICATION (11590 H & S)									
	I have been notified of my duty to register as a convicted narcotics offender pursuant to section 11590 of the California Health and Safety Code. I understand that:									
	My responsibility to register as a narcotics offender shall terminate 5 years after my discharge from prison, release from jail, or expiration of parole or probation. I must register within 30 days of coming into any county or city, or city and county in which I am located or									
	My responsibility to register as a narcotics offender shall terminate 5 years after my discharge from prison, release from jail, or expiration of parole or probation. I must register within 30 days of coming into any county or city, or city and county in which I am located or reside with the law enforcement agency having jurisdiction over my location or place of residence. I must, upon changing my location or place of residence, inform in writing within 10 days the law enforcement agency with which I last registered. If convicted in any other state court or any federal court, I am required to register under the provisions above. SIGNATURE OF PERSON NOTIFIED. DATE									
	SIGNATURE OF PERSO			D	ATE		Colled R			
	NOTIFYING AGENCY		ADDRI	ESS				TELEPHO	ONE NUMBER	
STATEMENT OF NOTIFYING	I certify that I notified the	individual des	scribed ab	ove of his or h	er duty to regis	ter under provis	ions of the ap	plicable stat	ute.	
OFFICER	SIGNATURE OF NOTIFYING OFFICER			DATE OF NOTIFICATION			<u> </u>	_		
										

STATE OF CALIFORNIA							
REGISTRATION RECEIPT							

Penal Code Section 290

Penal Code Section 457.1

OLN N2116738

Date of Birth

OLN N2106738

Date of Birth

6/4/1940

SPY ROCK RD CARMA RD LAWRONWILL 05.14

SPY ROCK RD. CARMA RD. LAYTONVIIL 95454

Date of Annual Update

NONE

Signature of Registration

11/29/2007

Signature of Registering Office/Badge Number

PROBLEMS!

I. I HAVE STATE MARITHANA PHYSICIANS
PRESCRIPTION AND CAN HAVE UPTO 2# 50
STATE DOES NOT AUTUMATICIN HAVE RICHT
TO MAKE ME REGISTER UNDER 11590HTS
WHERE ACTIVITY WAS LECKLUNDERSTATE GAY
2. I WAS NOT UNDER PROBATION AND OUT
OF PRISON MAR ZUED SO I SHOULD MT BE
REGISTERED NOW.

PROVIDENCE SEARCH AT ANY TIME